RECEIVED FEC MAIL CENTER 2015 MAY 11 AM 8: 50

The Sanction Committee 1140 5th Ave. S. Suite 301 Edmonds, WA 98020

March 2, 2015

Federal Election Commission 999 E Street, N.W. Washington, D.C. 20463

Re: Form 1, Statement of Organization—Unlimited Contributions

To Whom It May Concern:

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Respectfully submitted;

John L. Virlesvik, Treasurer

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STATEMENT OF

FEC MAIL CENTER

FORM 1		ORGANIZ	ATION	201	5 MAY A	M 8: 50
NAME OF COMMITTEE (ir	n full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5		
THE SAN	ICTIO	N COMMITT	EE			
				1111		
ADDRESS (number a	and street)	1140 5th A\	<u> VENUE S. , , , </u>			
(Check if a is changed	address (SUITE, 301,		<u> </u>		
Ū		EDMONDS,		WA STATE ▲	198020 ZIP	CODE A
COMMITTEE'S E-MA	AIL ADDRESS	;				
☐ ◀ (Check if is changed	address d)	SANCTION	@POLITICIAN.	COM		
	Ę	JVILLESVIK	@ `HOT-\$HOT,0	ÇQM	1 1 1 1	
☐ (Check if is change	address d)					
2. DATE 0	5 02	[2015]				
3. FEC IDENTIFI	CATION NUM	1BER ▶ C				
4. IS THIS STATE	MENT XX	X NEW (N) OR	AMENDED (A)			
I certify that I have	examined this	Statement and to the be	st of my knowledge and belief	it is true, correc	t and complete.	
Type or Print Name	of Treasurer	JOHN L/V	/ILLESVIK	···-		
Signature of Treasur	er /			Date 0	5 02	2015
NOTE: Submission of	//		n may subject the person signing			f 52 U.S.C. §30109.
Office Use Only			For further information Federal Election Commis Toll Free 800-424-9530 Local 202-694-1100		FEC F((Revised	

FEC	Form 1 (Revised 02/2009)	Page 2
	COMMITTEE	
f	te Committee:	
(a)	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b) Name of	This committee is an authorized committee, and is NOT a principal campaign committee. (Compinformation below.)	olete the candidate
Candidate		
Candidate Party Affili	Office Sought: House Senate President	State District
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Co	ommittee:	D
(d)		Democratic, Republican, etc.) Party
Political	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cont	nected organization is
	Corporation Corporation w/o Capital Stock	Labor Organization
	Membership Organization Trade Association	Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
(f) Xi	This committee supports/opposes more than one Federal candidate, and is NOT a separate secommittee. (i.e., nonconnected committee)	gregated fund or party
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fu	ndraising Representative:	hall Pullimen.
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
Co	ommittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4.		· AA

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Write or Type Committee Na		i aye o
6. Name of Any Connecte	d Organization, Affiliated Committee, Joint Fundraising Represen	ntative, or Leadership PAC Sponsor
NONE		
Mailing Address		
	CITY ST	TATE ZIP CODE
Relationship: Conne	cted Organization Affiliated Committee Joint Fundraising Repr	resentative Leadership PAC Sponsor
7. Custodian of Records: books and records.	dentify by name, address (phone number optional) and position of	f the person in possession of committee
Full Name		
Mailing Address		1111111
Title or Position	CITY STA	TE ZIP CODE
TREASURE	Telephone number	
8. Treasurer: List the name any designated agent (e.	and address (phone number optional) of the treasurer of the comg., assistant treasurer).	mittee; and the name and address of
Full Name of Treasurer	IN L. VILLESVIK	
Mailing Address	1,140,5th, AVENUE S.	1.
	SUITE, 301,	<u> </u>
	EDMONDS	/A 98020
Title or Position	CITY STA	TE ZIP CODE
TREASURE	Telephone number	425 931 2514

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Full Name of Designated Agent			
Mailing Address			
	CITY	STATE	ZIP CODE
Title or Position	Telephone	e number	J
safety deposit boxes or Name of Bank, Deposite			
Li.			1.
Mailing Address			
ـــــ			
ـــــ			
ـــــ		STATE	ZIP-CODE
ـــــ	CITY		ZIP-CODE
Mailing Address	CITY		ZIP-CODE
Mailing Address	CITY		ZIP-CODE
Mailing Address Name of Bank, Deposit	CITY		ZIP-CODE
Mailing Address Name of Bank, Deposit	CITY Ory, etc.		ZIP-CODE

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Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. Date of Receipt Hand Delivered Postmarked Date of Receipt **USPS First Class Mail** 4/15 Postmarked (R/C) **USPS** Registered/Certified Postmarked **USPS** Priority Mail Postmarked **USPS** Priority Mail Express Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): **Next Business Day Delivery** Date of Receipt Received from House Records & Registration Office Date of Receipt Received from Senate Public Records Office Date of Receipt Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify):

5/11/15

DATE PREPARED

PREPARER (3/2015)